

| CLAIMS ONLY | | | | | | Application Number <i>10/685,258</i> | Filing Date <i>5-18-06</i> | | | | | |
|-----------------|-----------------------------|--------|-----------------------|--------|------------------------|---|---|--------|-------|--------|-------|--------|
| CLAIMS | AS FILED <i>10-14-03</i> | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | * May be used for additional claims or amendments | | | | | |
| | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend |
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| 50 | | | | | | | 100 | | | | | |
| Total Indep | 2 | | 2 | | 2 | | Total Indep | | | | | |
| Total Depend | 0 | 0 | 0 | 0 | 0 | | Total Depend | | | | | |
| Total Claims | 2 | 2 | 2 | 2 | 2 | | Total Claims | | | | | |